



08-22-0J

PTO/SB/21 (01-03)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/627,021
		Filing Date	07/25/03
		First Named Inventor	Raymond W. Howard
		Art Unit	
		Examiner Name	
Total Number of Pages in This Submission	5	Attorney Docket Number	Lucky Line.1524

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
Other Enclosure(s):		
1. Return Postcard		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Murphy & Murphy, A.P.C. Hani Z. Sayed
Signature	
Date	08/20/2003

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 08/20/2003

Typed or printed	Valeina Jack
Signature	
Date	08/20/2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** **786.00**

Complete if Known	
Application Number	10/623,862
Filing Date	July 17, 2003
First Named Inventor	GANAN-CALVO, ALFONSO
Examiner Name	To Be Assigned
Art Unit	To Be Assigned
Attorney Docket No.	AERX-063CON4

METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order Other None Deposit Account:

Deposit Account Number 50-0815

Deposit Account Name Bozicevic, Field & Francis LLP

The Commissioner authorized to: (check all that apply)

Charge fees indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fees indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051	130	2051	65 Surcharge – late filing fee or oath
1052	50	2052	25 Surcharge – late provisional filing fee or cover sheet
1053	130	1053	130 Non-English specification
1812	2,520	1812	2,520 For filing a request for ex parte reexamination
1804	920*	1804	920* Requesting publication of SIR prior to Examination action
1805	1,840*	1805	1,840*Requesting publication of SIR after Examiner action
1251	110	2251	55 Extension for reply within first month
1252	410	2252	205 Extension for reply within second month
1253	930	2253	465 Extension for reply within third month
1254	1,450	2254	725 Extension for reply within fourth month
1255	1,970	2255	985 Extension for reply within fifth month
1401	320	2401	160 Notice of Appeal
1402	320	2402	160 Filing a brief in support of an appeal
1403	280	2403	140 Request for oral hearing
1451	1,510	1451	1,510 Petition to institute a public use proceeding
1452	110	2452	55 Petition to revive – unavoidable
1453	1,300	2453	650 Petition to revive – unintentional
Total Claims 22	-20** = 2	x 18	= 36.00
Indep. Claims 3	-3** = 0	x 84	= 0.00
Multiple Dependent			=
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	
1202 18	2202 9	Claims in excess of 20	
1201 84	2201 42	Independent claims in excess of 3	
1203 280	2203 140	Multiple dependent claim, if not paid	
1204 84	2204 42	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) \$ 36.00		Other fee (specify)	

**or number previously paid, if greater; For Reissues, see above.

*Reduced by Basic Filing Fee Paid **SUBTOTAL (3) (\$ 0.00****SUBMITTED BY****Complete (if applicable)**

Name (Print/Type)	Karl Bozicevic	Registration No. (Attorney/Agent)	28,807	Telephone	(650) 327-3400
Signature	J. Bozicevic			Date	08/20/2003

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